



Presentation to the
Military and Veterans' Affairs Committee
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State Policy: Treatment of Military Trauma Spectrum Disorders

The state of New Mexico recognizes that placing one's self in harm's way for their country means risking both physical and emotional trauma. Some of the wounds of war are not visible. Military traumatic spectrum disorders inclusive of post traumatic stress disorder are physical changes to a veteran's neurology in response to trauma or perceived trauma. This is a very real change in biology that can effect the veteran's "mind, body and soul" and may have rippling adverse effects on the families. In response the state of New Mexico through the Behavioral Health Collaborative is implementing a strategy in cooperation with veteran stakeholders to develop best practices within the civilian, publically funded behavioral health network across the state so as to be able to effectively engage veterans and their families into treatment and to provide a platform for sustained recovery from trauma spectrum disorders.



New Mexico Human Services Department

Implementation of Policy : Major Initiatives

- ◆ **Coordination of State Initiatives:** State Advisory Committee comprised of veterans and their families, state agencies, University of New Mexico, National Guard, V A, behavioral health providers, veteran groups and other stake holders provide advise and consultation in the development and coordination of multiple state initiatives.
- ◆ **Pilot Best Practice:** The Collaborative contracts with the Presbyterian Medical Services- Veterans and Family Support Services in Rio Rancho to develop best practices in supporting veterans, National Guard and their families: (<http://www.nmvets.com/program>). The state through federal competitive grant awards is developing the Access to Recovery program to provide treatment and support to the NM National Guard (<http://atrnm.org/>).
- ◆ **Workforce Development:** The Collaborative through the Statewide Entity, OptumHealth, contracts with 1,200 behavioral providers across the state and has undertaken multiple initiatives to train these providers in treatment of military PTSD.
- ◆ **Jail Diversion:** Unfortunately the first point of intervention for PTSD may be after an arrest. The Collaborative is implementing a statewide strategy to promote specialty courts to divert veterans with PTSD from jail into treatment when appropriate.
- ◆ **Native American:** The Collaborative has several initiatives to appropriately tailor services for Native American veterans specific to their own tribal community.



Veterans and Family Support Services: Developing Best Practices for Treatment of Military PTSD and support to the Veteran and Their Families

- ◆ A brief history of VFSS
- ◆ Overview of services
- ◆ Access to services and referral
- ◆ Staff composition
- ◆ Statewide training
- ◆ Collaboration
- ◆ Gallup, Farmington, Rio Rancho, other areas



Unique VFSS Services

- ◆ Developing protocols and service packages tailored to specific tribal communities
- ◆ Specialized case management
- ◆ Focused group therapy sessions
- ◆ Treating the family system
- ◆ VA link : Rio Rancho
- ◆ Telemedicine services
- ◆ Yellow Ribbon's, vet conferences, stand downs
- ◆ Urgent clinical support
- ◆ State wide crisis line



VFSS contact with Veterans and Families

- VFSS has served veterans and their family members through outreach, educational, and program development activities (3,004 individuals) and direct services (1,024 individuals) since 2007.
- In FY11, VFSS conducted 74 outreach, program development and marketing events to over 2,055 individuals.
- Between the three VFSS sites (Sandoval, San Juan and McKinley), VFSS has reached clients from 13 New Mexico counties.
- Evaluation of the VFSS program is provided through the University of New Mexico-Consortium for Behavioral Health Training and Research.



Summary of FY11 VFSS Report

- ◆ VFSS served 329 persons in FY11.
- ◆ VFSS increased the number of Native Americans served, particularly in San Juan and McKinley Counties (10 in FY10 and 50 in FY11).
- ◆ A significantly higher percentage of women than men are seeking services specifically for PTSD, domestic violence, and sexual abuse.
- ◆ A significantly higher percentage of men than women are seeking services specifically for traumatic brain injury.
- ◆ Approximately 27% of new VFSS consumers do not have insurance.
- ◆ Family members of veterans are seeking services at a significantly higher rate than veterans for social/family issues, sexual abuse, and general information.
- ◆ Veterans are seeking services at a significantly higher rate than family members for substance abuse problems.



Statewide Expansion of VFSS Pilot Outcomes

- ◆ **Best Practices:** VFSS and UNM-Consortium for Behavioral Health Training and Research have developed outcome studies in which performance measures are used to identify best practices.
- ◆ **Funding:** BHSD will then incorporate the best practice activities within service definitions that define what a service must encompass in order to be reimbursable within the public system.
- ◆ **Change in practice:** Through the training plan BHSD and PMS will engender training statewide on the best practice tied to CQI and ongoing mentoring to facilitate change in practice.
- ◆ **Advisory Committee:** BHSD is creating an advisory subcommittee to the SAC comprised of a wide variety of behavioral health providers who serve the military and their families to help the project identify best practices and service linkages.



Access to Recovery & National Guard

ATR Overview: Access to Recovery (ATR) is client choice driven three month voucher program in which both clinical and recovery support services are provided using a state of the art voucher management system (VMS). Individuals with substance abuse disorders are assessed at a Central Intake and then receive a voucher which they can use to purchase substance abuse treatment and support services. Substance abuse is a frequent consequence of PTSD. Over the last two years BHSD has established NM National Guard as a priority client and adapted services to their needs as described in the following bullets:

- ◆ The Central Intake in Albuquerque will be linked with the 2nd Judicial Veterans Court to provide substance abuse services for veterans diverted within this specialty court.
- ◆ In recent meetings with National Guard Commanders in Roswell, it was learned that the National Guard community had a significant need for substance abuse services. BHSD contracted with clinical and recovery support service (RSS) providers in Roswell to become part of the ATR network. The ATR mobile assessment site is open to see National Guard members as of August 12th.
- ◆ The ATR team is providing outreach across 7 other counties to veterans and National Guard members in need of Substance Abuse services. There are 55 vouchers a month set aside for New Mexico National Guard members. Income and insurance requirements have been waived for National Guard members.
- ◆ Five Sandoval Indian Pueblo is an ATR Central Intake located on the Santa Ana reservation in Sandoval County. It is be one of the service systems available to Native American Veterans.



Statewide Expansion of Veteran Specialty Courts

- ◆ Within VFSS is a federally funded pilot program, Jail Diversion/Veteran First that diverts veterans with trauma disorder from jail into treatment. It operates in Sandoval, Valencia and Cibola counties and will expand in to San Juan county this year. It has a specialized focus on working with the tribal communities to develop services for Native American veterans tailored to the specific tribe.
- ◆ The state is providing state match funds to expand the project through the creation of a Veterans Court within the 2nd Judicial Court in Bernalillo County. The new court held its first session on November 9, 2011.
- ◆ New Mexico has a total population of 2,059,179 of which 1,027,951 (50%) reside in the five (5) counties providing or will be providing within the next year veteran specific jail diversion programs.



Workforce Development: Certification

Serving Our Veterans Behavioral Health Certificate is designed to train civilian behavioral health and primary care providers, on military orientation and specific issues affecting veterans and their families. It offers 14 self-directed, self-paced online courses that:

- ◆ Provide the latest clinical guidelines from the Department of Defense.
- ◆ Demonstrate applicable knowledge and skills through real-life examples.
- ◆ Emphasize cultural sensitivities to ensure clinical competency.

The Serving Our Veterans Certificate is a public/private partnership among the National Council for Community Behavioral Healthcare, the Department of Defense Center for Deployment Psychology (CDP) at the Uniformed Services University of the Health Sciences, and Essential Learning to ensure that veterans and their families receive the exceptional services. OptumHealth New Mexico, the Behavioral Health Services Division and the Presbyterian Medical Services are planning to sponsor 50 publically agencies to receive this training in FY12.



Workforce Development: Trauma Informed System of Care

New Mexico is developing mechanisms to promote trauma informed behavioral health care throughout the public behavioral health system. New Mexico has facilitated the creation of a core team of behavioral health professionals with significant credentials on trauma treatment and trauma informed care:

- ◆ Consortium for Behavioral Health Training and Research, UNM
- ◆ University of New Mexico Alcohol and Substance Abuse Program
- ◆ Turquoise Lodge Inpatient Detoxification
- ◆ Presbyterian Medical Services -VFSS
- ◆ Bernalillo Metropolitan Assessment and Treatment Center

The group's mission is to develop a trauma informed fidelity tool that is adaptable to a wide range of public service environments including primary health care, outpatient and inpatient substance abuse services and jail diversion programs. The second phase of the initiative is to develop a process whereby agencies self assess with trauma informed fidelity scale and then incorporate outcomes for the self review into a continuous quality review process.



New Mexico Human Services Department

Peer Specialists-Vet to Vet

It is very evident that the civilian behavioral health provider must have a “vet to vet” connection to engage veterans into treatment services. The Office of Consumer Affairs (OCA) oversees a certification process whereby peers (consumers of behavioral health services) are certified to be able work within publically funded Community Mental Health Centers. Peer Specialists who are veterans will be eligible to complete a veteran CEU track sponsored by the Office of Consumer Affairs.

The desired outcome is that veterans who experience PTSD can be certified as peer specialists, receive further veterans specific training and can be employed within an publically funded behavioral health agency. This allows the agency to access the workforce to implement vet to vet services. There is both stable state and Medicaid funding for the provision of these vet to vet services which allows for sustainability of the service.



Training the Public Workforce

- ◆ **Train First Responders:** In the spring of 2011 BHSD funded the Dona Ana Forensic Intervention Consortium to conduct four seminars for first responders and dispatchers in four locations across the state. The seminars provided basic information about PTSD and TBI; signs indicating that the individual in crisis has both PTSD and TBI that first responders can recognize; and methods for handling these situations in the field.
- ◆ **Outreach to Military:** On October 15, 2011 BHSD helped sponsor and PMS participated in the NM Department of Veteran Services *2011 Women Veterans' Conference and Health Fair* in Albuquerque. Representatives from the VA, DoD, state and other veterans' service organizations presented information about VA and state veterans' benefits and programs ranging from filing for disability compensation, the new 9/11 G.I. Education Bill, and other benefits.
- ◆ **Train Public Behavioral Health Providers:** On October 19, 2011 at the statewide required training for Core Service Agencies funded by BHSD, PMS sponsored an all day track that focuses on clinical issues pre and post deployment affecting military personnel and their families evidence-based and best practices for treating combat trauma/PTSD.
- ◆ **Train Public Behavioral Health Providers:** BHSD and PMS were sponsors of the New Mexico Mental Health Counselor's Association's annual conference *Trauma in the 21st Century: A Symposium of the Mind & Body* held on April 29th and 30th by sponsoring 40 attendees.



Next Steps

We still have a long way to go. The next steps in service system development is to continue building on the existing work in order to:

- ◆ Identify best practice services and the integration of services into a system of care.
- ◆ Develop innovative “pay for performance” practices that lead to best outcomes for the amount of available funding.
- ◆ Increase service capacity and access to meet anticipated need.
- ◆ Develop data systems track indicators for service need, service capacity and performance outcomes in order to drive system development.
- ◆ Increase linkage, coordination and integration with the myriad of veteran/PTSD stakeholders to facilitate accomplishing the previously identified tasks.

